

as one never strictly applicable to any of the diseases incident to the puerperal state, and from the loose manner in which it has been used, leading to the utmost confusion and the most serious errors in respect to the maladies liable to occur in child-bed. Confusion and errors which would be but little amended by adopting the term puerperal fever in only a generic sense, with a specific affix to define its meaning in the different cases to which it is applied.

We do not believe that all febrile affections occurring in puerperal females are identical, though we admit that they are all very greatly modified by the puerperal state, and, occasionally, by some prevailing epidemic or endemic influence. Our experience in conjunction with a pretty extended investigation of the subject has taught us that puerperal women are liable to a fever of the most formidable character, originating from a zymotic cause, traceable, in some instances, but not in others; a fever altogether independent, in every case, of inflammation, although such inflammation most generally occurs in the course of the disease as a secondary affection. This fever is a disease not peculiar to the puerperal female, but may occur also in the non-pregnant, the virgin, the male. It is propagatable by contagion or by infection, which latter will often adhere with great tenacity to the wards of a lying-in hospital, so as to propagate the disease to those who occupy them, even some time after they had been evacuated, and, apparently, thoroughly cleansed and aired.

That the disease just referred to, when it occurs in the recently delivered female, constitutes the most formidable of the febrile morbid conditions which have been included under the very loose term puerperal fever, can be established by an overwhelming mass of the most incontrovertible evidence.

Without formally recognizing the fact referred to, Dr. Byford, nevertheless, accedes to its correctness in his description of what he denominates the *toxæmic* form of puerperal fever. This description, although confused, and, in some respects, contradictory, has, in its general outlines, been very evidently drawn from the disease to which we refer as the most severe, unmanageable, and quickly fatal of the forms of fever, with which the puerperal female is liable to be attacked.

The chapters on uterine and ovarian tumors are marked by good sense and commendable caution. They embrace a tolerably clear and, though very concise, a fair exhibit of the present state of medical opinion in respect to the subjects treated of. The same may be said of the chapter on diseases of the mammae. The one on phlegmasia dolens, or crural phlebitis, is clear and accurate and highly instructive.

We would beg leave to remark that in the case of a new edition of the work of Dr. Byford being called for, and we see no reason to doubt that such will be the case, the Latinity of the several prescriptions given in it will require a careful revision. It is now, certainly, anything but correct. It is to be hoped, also, that the bad taste of combining in the same prescription Latin and English, will be avoided.

We have remarked that the name of Dr. Robert Lee, author of the well-known and highly valuable work, *Researches on the more Important Diseases of Women*, is invariably misspelled by Dr. Byford, *Hay*. D. F. C.

ART. XX.—*Materia Medica for the Use of Students.* By JOHN B. BIDDLE, M. D., Professor of Materia Medica and General Therapeutics in the Jefferson Medical College, Member of the American Philosophical Society, Fellow of the College of Physicians, etc. etc. With illustrations. 8vo. pp. 359. Philadelphia: Lindsay & Blakiston. 1865.

THIS is a second edition, revised, enlarged, and adapted to the last edition of the United States Pharmacopœia. The author does not design his work "to take the place of the more voluminous and systematic treatises upon the subject," but he believes, nevertheless, "that it will be found to contain a succinct

account of all the articles of the *Materia Medica* in use in this country, and to furnish a suitable text-book to the courses of lectures delivered upon the branch."

The descriptions of the articles are summary in character and calculated to assist a student in answering questions propounded by a "quiz-master," or by a professor who may make use of the work as a syllabus of his teachings; but it is conjectured that from it alone a student could not acquire a sufficient knowledge to enable him to prescribe medicines satisfactorily, if it is necessary to discriminate in the application of articles which possess a common or analogous property or power, as, for example, jalep, scammony, gamboge, elaterium, and croton oil, all of which are termed hydragogue cathartics; but, whether all are equally adapted to all cases in which some hydragogue cathartic is recommended is not stated. Such objection, however, is not more applicable to this than to other *compendiums*. As a fair specimen of the succinct manner in which the author treats the subject, we copy, in full, his account of colocynth.

"**COLOCYNTHIS—COLOCYNTH.**—Colocynth is the **FRUIT** (deprived of its rind) of *Citrellus Colocynthis* or Bitter Cucumber (*Nat. Ord. Cucurbitaceæ*), an annual plant of the south of Europe and parts of Asia and Africa, resembling the common watermelon. The fruit is *peeled* and dried for exportation, and comes to us from the Levant. It consists of light, whitish, spongy balls, about the size of a small orange, filled with numerous seeds. For medical use, the *pulp* only is employed, and the seeds, which are inactive, are rejected. The pulp has a feeble odour, and a nauseous, intensely bitter taste. It yields its virtues to both water and alcohol, and contains a peculiar bitter principle, termed *colocynthin*, resin, &c.

"**Effects and uses.**—Colocynth is a violent hydragogue cathartic, acting sometimes very harshly even in small doses, and in overdoses producing dangerous and occasionally fatal enteric inflammation. The dose is gr. v to x. It is seldom, however, administered alone. In the form of *compound extract* (which contains also aloes, scammony, and cardamom), it is a favourite prescription—dose gr. v–xx; and the compound extract, combined with the extract of jalap, calomel and gamboge, constitutes a very popular compound, known as *compound cathartic pills*."

This description of colocynth would be improved for practical application and reference had the proportional quantities of the ingredients of the compounds named been stated. The reader of this compendium would refer to it in vain to ascertain how much calomel a compound cathartic pill contains, an item of information which it might be desirable to possess.

An elementary work on *materia medica* would be more useful if it embraced also some definite instructions on the modes of administering certain medicines. We are told (pp. 78–9), that ammoniac is a gum resin used chiefly "as an antispasmodic expectorant," and, "dose gr. x to xxx. A *mixture and plaster* are officinal." But the student might desire to know whether the dose of from gr. x to xxx of the gum-resin ammoniac is to be given to the patient in the form of pill, mixture or plaster, and at what intervals of time it should be repeated.

The book teaches that subnitrate of bismuth is prescribed in the "dose, gr. v to ℥i, or even ʒss, in powder or pill. Externally it is a good remedy in skin diseases in the form of ointment." How is the patient to dispose of a scruple or half drachm of subnitrate of bismuth in powder? Is it to be taken into the mouth dry, or mingled with water or syrup? How is a half drachm dose to be made into pill, and of how many pills should the dose consist?

Acidum nitricum dilutum; (p. 125) "dose, for internal use, 20 to 40 drops, three times a day, reduced with water."

How much water is enough to dilute forty drops of dilute nitric acid (specific gravity 1.068), to prevent it from irritating the surface with which it is placed contact?

Under the title arrowroot we find the following: "It is dissolved in boiling water (a tablespoonful to water Oj), and forms a gelatinous solution; a larger proportion of arrowroot makes a jelly-like mass." Prepared according to the method suggested in this direction, namely, to pour a pint of boiling water on a tablespoonful of arrowroot, or, to put a tablespoonful of arrowroot into a pint

of water at the boiling temperature, the article would not be in its most acceptable form.

We do not regard the small objections implied in the above citations as especially applicable to the work before us, because the same and analogous imperfections exist in most if not in all treatises on *materia medica*, not excepting even the classic works of Pereira, Royle, Wood and Bache, and others. Yet, in our humble judgment, the practice of medicine would gain something by having students taught, while they are learning *materia medica*, the methods and forms of administering medicines, especially such as require peculiar manipulation to render them fit to be offered to the lips of the patient. In cities where there are skilful druggists and expert nurses, it may be enough that the physician name the article and dose he deems proper for his patient. But in the country, in rural districts, in the army and navy, practitioners are required to be able to give detailed and minute directions not only about the administration of medicines, but also about the preparation of diet for the sick, and if they are ignorant of these details, upon the proper execution of which the comfort of the patient and success of treatment so often depend, there is no one at hand to supply the needful though simple information.

It is a fashion to overlook in medical descriptions, the unvarying standards of weight and measure which have been established and to take those which are uncertain, vague and changing. The fruit of *colocynthis* is said to be "the size of a small orange," for example, yet the orange which would be called small in Brazil would be termed large in China: oranges may be from one and a half to four and a half and five inches in diameter and not be either small or large in comparison with those grown in the same locality. Similar remarks are applicable to the phrases "big as a hickory-nut," "big as the end of my thumb," "the size of a filbert," "big as an apple," and "high as Christ-church steeple," which was a classic unit of measure of height among the earlier citizens of Philadelphia.

Teachers of the science and art of medicine and surgery might abandon this fashion, advantageously for students, and apply the established standards of weight and measure instead. It seems preferable, even if nothing be actually gained, to direct that a dose shall be administered in a stated number of ounces or other uniform measure, than to employ the too common expressions, in "some" or "a little water," or "largely reduced," "slightly diluted," &c. But, it is believed that precise teaching in these apparently unimportant details is calculated to impress on the mind of the student the habit of being accurate in whatever relates to the art of prescribing and administering medicines.

The "*Materia Medica for Students*" is well written, clearly printed, and the twenty-four illustrations, though not very elegant specimens of the wood-engraver's art, fairly represent the general aspect of the plants they are designed to portray. It will be found a useful hand-book, by those students especially who may be under the instruction of its able and accomplished author.

W. S. W. R.

ART. XXI.—*On the Direct Influence of Medicinal and Morbific Agents upon the Muscular Tissue of the Bloodvessels.* By R. CRESSON STILES, M. D., etc. "Non fingendum, aut excogitandum, sed inveniendum." Read before the King's County Medical Society, Brooklyn, March 21, 1865. 8vo. pp. 26. New York, 1865.

WE have failed to discover whether Dr. Stiles, in attempting to show that the action of morbid agents—in the production of disease and that of remedial agents in its arrest—is exerted, through the medium of the blood, upon the muscular tissue of the bloodvessels, would restrict this to certain forms of disease, and to particular morbid and therapeutic agents, or extend it to all agents by which disease in every instance is induced, and, when induced, is either arrested in its course or conducted to a favourable issue. In the exposition of his views